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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Accusation or Docket Number
10-693802

CLAIMS AS FILED - PART I

Substitute for Form PTO-875

CLAIMS AS FILED - PART I

multiple dependent claim present (7 CFR 1.16(d))

CLAIMS AS AMENDED - PART II

3-15-05		(Column 1)	(Column 2)	(Column 3)
3/1/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
100 (37 CFR 1.16(a))	22	MINUS	22	-
100 (37 CFR 1.16(d))	1	MINUS	3	-

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEES		RATE	FEES
X 1	1	OR		1
X 2	2	OR	X 1	2
X 3	3	OR	X 5	5
X 4	4	OR	X 3	3
TOTAL		OR	TOTAL	

3-15-05		(Column 1)	(Column 2)	(Column 3)
3/1/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
100 (37 CFR 1.16(a))	22	MINUS	22	-
100 (37 CFR 1.16(d))	1	MINUS	3	-

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI. TIONAL FEE		RATE	ADDI. TIONAL FEE
<u>25</u>		OR	<u>50</u>	
<u>100</u>		OR	<u>200</u>	
<u>180</u>		OR	<u>360</u>	
TOTAL FEE		OR	TOTAL ADDI. FEE	

7
100-2020-00001-00000 (33 CFR 160.01)

3/22/3

AMENDMENT	(Column 1)		(Column 2)		(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT- EXTRA	
Total (37 CFR 1.16(d))	27	Minus	23	5		
Dependent (37 CFR 1.16(d))	1	Minus	3	0		

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
<u>1.25</u>		$\times 1.50 =$	<u>2.50</u>
<u>1.00</u>		<u>1.50</u>	
<u>1.00</u>		$+ 3.00 =$	
TOTAL ADUL FEE		TOTAL ADUL FEE	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

AMENDMENT	(Column 1)		(Column 2)		(Column 3)	
	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	MINUS	PRESENT EXTRA	
Total 37 CFR 1.10(e)(1)	26	MINUS	27	MINUS	0	
Independent 37 CFR 1.10(e)(3)	1	MINUS	3	MINUS	0	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
25.		OR \$ 50.	
00.		OR 200.	
00.		OR 360	
L			
FEES		TOTAL	
		AD'L FEE	

• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
• If the entry in column 1 is greater than the entry in column 2, write "1".
• If the entry in column 1 is equal to the entry in column 2, write "2".
• If the entry in column 1 is less than or equal to the entry in column 2, write "3".
• If the entry in column 1 is greater than or equal to the entry in column 2, write "4".
• If the entry in column 1 is less than the entry in column 2, write "5".
• If the entry in column 1 is greater than the entry in column 2, write "6".
• If the entry in column 1 is equal to the entry in column 2, write "7".
• If the entry in column 1 is less than or equal to the entry in column 2, write "8".
• If the entry in column 1 is greater than or equal to the entry in column 2, write "9".

17. Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. Enter "0" if none of the boxes in column 1 are checked. If the amount paid for in this space is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and/or amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-212-8100 and select option 2.